

MILPERSMAN 1301-811

POLICIES AND PROCEDURES – MEDICAL COMMUNITY SCREENING FOR COMMANDING OFFICER AND EXECUTIVE OFFICER

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1. **Policy.** All medical community officers assigned to commanding officer (CO) and executive officer (XO) positions at medical treatment facilities (MTF), research or support commands, and operational commands worldwide will be screened prior to assignment by an administrative board convened by Commander, Navy Personnel Command (COMNAVPERSCOM).

a. Officers will be screened to ensure only the best and fully qualified officers are ordered to CO and XO positions.

b. Navy Personnel Command (NAVPERSCOM) Head, Medical Assignment and Placement Branch (PERS-4415) will be the board sponsor of the administrative screening board.

2. **Eligibility.** Officers in the Medical Corps (2100), Dental Corps (2200), Medical Service Corps (2300), and Nurse Corps (2900) designators are eligible for CO and XO screening consideration. Additionally, officers in these designators must meet the following requirements:

a. Must be captain (O-6) at the time the board convenes;

b. Must be worldwide assignable;

c. Must meet body composition assessment and physical fitness assessment standards;

d. CO applicants must be able to complete a full 2-year CO tour before reaching 62 years of age, the statutory age for mandatory retirement;

e. XO applicants must have at least 5 years remaining on active duty before reaching 62 years of age, the statutory age for mandatory retirement; and

f. Officers must apply by the advertised deadline to be considered by the board.

3. Application Process

a. The Deputy Surgeon General (DSG) will release guidance in the second quarter of each fiscal year announcing the CO and XO screening board dates, the application process, and the deadline for application submission. The announcement will be distributed throughout the Navy medicine communities and published on the Navy medicine's senior executive medicine (SEM) Web page on Navy Knowledge Online (NKO).

b. Officers desiring to be screened for the upcoming year must submit an application containing the following documents before the advertised deadline in the announcement from the DSG:

(1) Completed screening application with signature, date, and identification of the SEM categories for which member is requesting to be screened;

(2) CO's letter of recommendation;

(3) An endorsement from the regional commander or immediate superior-in-charge (flag grade officer);

(4) Current fitness report;

(5) Curriculum vitae and biography; and

(6) Official military photo taken within 12 months of board convening date.

c. The preferred method for submitting an application is via encrypted e-mail with scanned copies of signed documents attached. Signed applications will also be accepted via mail or FAX. Applications must be sent to the contacts that will be listed in the DSG guidance on NKO.

d. Applicants must successfully complete an oral board process conducted by Navy medicine regional commanders per Bureau of Medicine and Surgery (BUMED) guidance. Results of the

oral board shall be forwarded in writing to NAVPERSCOM (PERS-4415); officers not recommended by the oral board will not be considered by the command screen board.

e. Only applicants who submit an application package prior to the submission deadline and pass their oral board will be eligible for screening.

4. **Membership.** The board membership shall consist of the following:

1	Medical department flag officer who serves as the president;
4	Corps Chief flag officers; and
2	Medical department flag officers with operational and or research experience.

Membership changes with each board except in cases where there is only one flag officer available to represent a specific corps. NAVPERSCOM (PERS-4415) will assign the head recorder and assistant recorders as required.

5. **Quota Determination.** CO and XO screening quotas are established annually by the Navy Surgeon General based upon the number of leadership opportunities coming available in the upcoming fiscal year.

6. **Screening Board.** In order to ensure only the best and fully qualified candidates are selected for these leadership positions, applicants will compete within the following SEM categories:

a. MTFs to include:

- (1) Naval medical centers;
- (2) Naval hospitals (teaching and non-teaching);
- (3) Naval health clinics;
- (4) Hospital ships; and

(5) Jointly staffed MTFs (i.e. Walter Reed National Military Medical Center, Tripler Army Medical Center, and Fort Belvoir Community Hospital).

- b. Research activities;
- c. Support activities; and
- d. Major operational commands.
 - (1) Dental battalions or naval dental centers.
 - (2) Medical battalions.
 - (3) Field medical training battalions.

7. **Release of Results**

- a. The results of the screening board are approved by Commander, NAVPERSCOM. Approved board results are forwarded by COMNAVPERSCOM to the Surgeon General (SG).
- b. The SG or DSG releases the results of the board via the various corps chiefs to make personal notifications before posting results publicly on the Navy Medicine Web page on Navy Knowledge Online (NKO).
- c. Screening for SEM positions is valid for 1 year only. Applicants not selected may apply in subsequent years if they meet eligibility criteria.

8. **CO and XO Slating.**

- a. Following approval of the board screening results, medical department detailers will prepare command leadership slates, proposing screened officers to respective billets, taking into consideration skill sets, projected rotation dates, proposed fill dates, subspecialty experience required, preferences, and the needs of the Navy.
- b. The proposed slate will be vetted through the deputy corps chiefs and submitted to the DSG and BUMED, Council of Corps Chiefs for approval and submission to the SG. Upon SG approval, officers slated for CO or XO assignment will be notified of their next assignment. Any officer who refuses assignment after approval of the CO or XO slate will be required to submit a declination letter per MILPERSMAN 1301-818.

c. Command screened officers not slated will remain available for consideration if unplanned openings occur during the fiscal year in which they were screened. If no assignment is available, officers will be required to rescreen the following year.

9. **Command Screening Exceptions.** General policy is that only command screened officers will be assigned to CO or XO billets. Every effort will be made to assign screened officers prior to any alternate being assigned.

a. On rare occasions, exceptions to this policy may arise when there are no command screened officers or alternates available, thus necessitating assignment of a nonboard screened officer with the proper skill sets to a command leadership billet.

b. Any nonboard screened officer slated to fill a command leadership billet will be administratively screened by BUMED, Council of Corps Chiefs and the DSG who will forward a recommendation for approval to the Navy Surgeon General.